

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 869542	RECEIPT DATE:	06 / 29 / 01
IA NUMBER: PCT/	IB99 / 02082	IA FILING DATE:	12 / 23 / 99
FAMILY NAME:	RATAMO	DELAY WAIVED (Y/N):	N
GIVEN NAME:	ILIKKA	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	12 / 31 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	367.40268X00	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX
NAME:	ROBERT M BAUER		
	ANTONELLI TERRY STOUT & KRAUS		
STREET:	1300 NORTH 17TH STREET SUITE 1800		
CITY:	ARLINGTON		
STATE/COUNTRY:	VA	ZIP:	22209
EMAIL:			
APPLICATION TITLES:			
	PORTABLE CONTROLLER		

TAB TO LAST POSITION,PUSH SEND